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12-13-04 17:37 From HUNTON & WILLIAMS

T-148 P 03/10 F-068

DEC 13 2004

Attorney Docket No. 60117.000007  
Attorney Customer No. 21967

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re U.S. Patent Application of:

Jens PETERSEN, et al.

Serial No.: 09/938,670

Filing Date: August 27, 2001

Title: POLYACRYLAMIDE HYDROGEL  
AND ITS USE AS AN  
ENDOPROSTHESIS

Group Art Unit: 3738

Examiner: David J. Isabella

Confirmation No.: 2509

MAILSTOP AMENDMENT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

PETITION FOR ONE-MONTH EXTENSION OF TIME,  
STATEMENT OF SUBSTANCE OF INTERVIEW UNDER 37 C.F.R. § 1.133  
AND AMENDMENT UNDER 37 C.F.R. § 1.111

Sir:

PETITION

Applicants hereby petition for a one-month extension of time under 37 C.F.R. § 1.136(a) for responding to the U.S. Patent and Trademark Office (PTO) non-final Office Action mailed on August 11, 2004 in the above-captioned application (the Application). Accordingly, Applicants respectfully request that the time for response be extended up to and including December 11, 2004. The Commissioner is authorized to deduct the amount of \$120.00 from the undersigned's Deposit Account No. 50-0206 to cover the one-month extension of time fee.

RESPONSE

This Amendment is filed in response to a non-final Office Action dated August 11, 2004 in the Application and in view of the Examiner interview held on December 8, 2004.

Amendment to the claims are reflected in the listing of claims which begins on page 2 of this Amendment.

Remarks begin on page 5 of this Amendment.

04/19/38, 670

Application or Docket Number

55320.00006

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2000

## CLAIMS AS FILED - PART I

(Column 1) (Column 2)

|                                  |                |                          |
|----------------------------------|----------------|--------------------------|
| TOTAL CLAIMS                     | 40             |                          |
| FOR                              | NUMBER FILED   | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | 110 minus 20 = | 20                       |
| INDEPENDENT CLAIMS               | 9 minus 3 =    | 6                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |                | <input type="checkbox"/> |

• If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|---|---|-------|---|------------------|
|   | Total                                     | • 43  | Minus                                       | • 40 = 3         |
| Independent   | • 9                                       | Minus | • 9   | = 0              |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |       |   |                  |

6/2/04

(Column 1) (Column 2) (Column 3)

| AMENDMENT B   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|---|---|-------|---|------------------|
|   | Total                                     | • 43  | Minus                                       | • 43 = —         |
| Independent   | • 7                                       | Minus | • 9   | = —              |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |       |   |                  |

12-13-04 (Column 1)

(Column 2) (Column 3)

| AMENDMENT C   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|---|---|-------|---|------------------|
|   | Total                                     | • 11  | Minus                                       | • 43 = 1         |
| Independent   | • 1                                       | Minus | • 9   | = 1              |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |   |       |   |                  |

• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY  
TYPE  OTHER THAN  
OR SMALL ENTITY

|           |        |              |        |
|-----------|--------|--------------|--------|
| RATE      | FEES   | RATE         | FEES   |
| BASIC FEE | 355.00 | OR BASIC FEE | 710.00 |
| X\$ 9=    |        | OR X\$18=    | 360    |
| X40=      |        | OR X80=      | 480    |
| +135=     |        | OR +270=     | 0      |
| TOTAL     |        | OR TOTAL     | 1550   |

SMALL ENTITY OR OTHER THAN  
OR SMALL ENTITY

|                  |                        |                     |                        |
|------------------|------------------------|---------------------|------------------------|
| RATE             | ADDI-<br>TIONAL<br>FEE | RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=           |                        | OR X\$18=           | 5400                   |
| X40=             |                        | OR X80=             |                        |
| +135=            |                        | OR +270=            |                        |
| TOTAL ADDIT. FEE |                        | OR TOTAL ADDIT. FEE |                        |

|                  |                        |                     |                        |
|------------------|------------------------|---------------------|------------------------|
| RATE             | ADDI-<br>TIONAL<br>FEE | RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=           |                        | OR X\$18=           |                        |
| X40=             |                        | OR X80=             |                        |
| +135=            |                        | OR +270=            |                        |
| TOTAL ADDIT. FEE |                        | OR TOTAL ADDIT. FEE |                        |

|                  |                        |                     |                        |
|------------------|------------------------|---------------------|------------------------|
| RATE             | ADDI-<br>TIONAL<br>FEE | RATE                | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=           |                        | OR X\$18=           |                        |
| X40=             |                        | OR X80=             |                        |
| +135=            |                        | OR +270=            |                        |
| TOTAL ADDIT. FEE |                        | OR TOTAL ADDIT. FEE |                        |